

Division of Corporations

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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
A Better Way Home Health, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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Fax Audit #: H150000266873

**Articles of Organization
of
A Better Way Home Health, LLC
(A Florida Limited Liability Company)**

The undersigned Member adopts these Articles of Organization for the purpose of forming a Limited Liability Company under The Florida Limited Liability Company Act, Chapter 605 of the Florida Statutes (the "Act").

1. **NAME**. The name of this limited liability company (the "Company") is **A BETTER WAY HOME HEALTH, LLC**.

2. **EFFECTIVE DATE AND DURATION**. The existence of the Company shall commence on February 2, 2015. The period of duration of the Company shall be perpetual.

3. **PURPOSE**. The purpose and business of the Company shall be to engage in any lawful act or activity which may be carried on by a limited liability company under the Act.

4. **MAILING ADDRESS AND STREET ADDRESS OF PRINCIPAL OFFICE**.
The mailing address and street address of the Company is 340 S. Tamiami Trail, Nokomis, Florida 34275.

5. **REGISTERED AGENT**. The name and street address of the initial Registered Agent of the Company is: Victoria Pettograsso, 340 S. Tamiami Trail, Nokomis, Florida 34275.

6. **MANAGEMENT BY MANAGER**. A Member of the Company shall not be a Manager by virtue of his or her status as a Member. The Company shall be managed by one or more Managers appointed by the Member. The name and address of the initial Manager who shall manage the Company is as follows:

- Victoria Pettograsso, 340 S. Tamiami Trail, Nokomis, Florida 34275

7. **ADDITIONAL MEMBERS**. New Members may be admitted only upon the unanimous written consent of the Members and in accordance with restrictions set forth in the Operating Agreement of the Company.

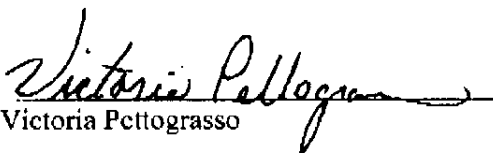
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Horlick & Corbridge, P.A.
1314 E. Venice Avenue, Suite D
Venice, Florida 34285
(941) 484-5656
FL BAR #: 0292583

Fax Audit #: H150000266873

8. **LIMITED LIABILITY**. No Member or Manager or agent of the Company shall be liable under a judgment or decree, or order of a court, or in any other manner for any debt, obligation, or liability of the Company.

IN WITNESS WHEREOF the undersigned, as Member, hereby executes these Articles of Organization this 2nd day of February, 2015.


Victoria Peltograsso

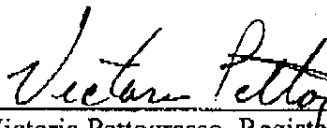
"Member"

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Fax Audit #: H150000266873**A BETTER WAY HOME HEALTH, LLC****CERTIFICATE OF DESIGNATION OF REGISTERED AGENT**

Having been designated Registered Agent to accept service of process for the above stated limited liability company, **A Better Way Home Health, LLC**, at the place designated in this Certificate, the undersigned Victoria Pettograsso, whose address is 340 S. Tamiami Trail, Nokomis, Florida 34275, does hereby accept the designation and agree to act in that capacity, and agrees to comply with the provisions of Florida Statutes relative thereto.

DATED: February 2, 2015


Victoria Pettograsso, Registered Agent

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